COMMERCIAL FUEL/GAS

County of Stafford
Department of Public Works PO Box 339 1300 Courthouse Rd. Stafford, Virginia 22555-0339 (540) 658-8650 www.co.stafford.va.us



	RECEIVED BY:	
	DATE:	
	R/E TAXES CURRENT:	
A/P:		
PARENT #:		

JOB LOCATION			
STREET ADDRESS:			
TAX MAP #:	SECTION:	LOT:	
SUBDIVISION:			
CURRENT OWNER INFORMATION	ON .		
NAME:			
CURRENT ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		
CONTRACTOR INFORMATION			
CONTRACTOR/ COMPANY:		OR ATTACH OWNER AFFIDAVIT	
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		
PRINT NAME			
SIGNATURE:			
VIRGINIA CONTRACTORS LICENSE #:			
LICENSE CLASS:LICENSE D	ESIGNATION:E>	(PIRATION DATE:	
By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.			
TENANT INFORMATION		\square N/A \square SAME AS OWNER	
NAME:			
CURRENT ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		
APPLICANT INFORMATION	☐ SAME AS C	ONTRACTOR SAME AS OWNER	
NAME:			
CURRENT ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE:	EMAIL:		

TOTAL VALUATION			
DECLARED PROJECT VALUE \$ (Total contract value)	CALCULATED PROJECT VALUE \$(Per ICC)		
DESCRIPTION OF WORK	USBC EDITION:		
PROJECT INFORMATION CHECK APPROPRIATE	BOXED OR ENTER QUANTITY WHERE REQUIRED		
# Underground Tanks Gallons:			
# Above Ground Tanks Gallons:			
# Tank Removal			
# Gasoline Piping/Appliances			
# Diesel Piping/Appliances			
# Medical Gas Piping/Appliances			
# Fuel Vapor Lines			
# LPG Piping/Appliances			
# Natural Gas Piping/Appliances			
TIME LIMITATION OF APPLICATION			
Virginia Uniform Statewide Building Code 108	3.8		
An application for a permit for any proposed work shall be deeme unless such application has been pursued in good faith or a perm grant one or more extensions of time if a justifiable cause is demo	it has been issued, except that the building official is authorized to		
APPLICANT INITIALS:			
APPLICANT AGREEMENT			
All information on this form is part of the application and must be application, that the information is complete and correct and that Virginia Uniform Statewide Building Code and other applicable law	the work performed and equipment installed will conform to the		
NAME:			
SIGNATURE:	DATE:		
ISSUANCE OF PLANS OR APPROVED DOCU	MENTS (COMPLETE AT PERMIT ISSUANCE)		
I have received county approved plans or documents.			
SIGNATURE:	DATE:		
OFFICE USE ONLY			